

## FACSIMILE COVER SHEET

Date:

October 2, 2003

To:

Examiner William A. Rivera

Fax No:

(703) 872-9327

From:

Amanda M. Church

Tel. No:

(312) 321-4787

Client No:

659/691

No. of Pages (inc. this page):

Confirmation Copy To Follow:

IF YOU HAVE ANY PROBLEMS RECEIVING THIS MESSAGE, PLEASE CALL 312-321-4200 AND ASK FOR: Connie Beam, ext. 4353 BRINKS HOFER GILSON

A Professional Corporation Intellectual Property Attorneys

NBC Tower - Suite 3600 455 N, Cityfront Plaza Drive Chicago, Illinois 60611-5599 Facsimile 312-321-4299 Telephone 312-321-4200

San Jose, CA Indianapolis, IN Ann Arbor, MI Arlington, VA

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COVER MESSAGE:

Serial No. Applicant: Client/Matter 09/659,307 NEWMAN ET A 659/691

Commissioner fo P.O. Box 1450 Alexandria, VA 22313-1450 DFFICIAL

Please acknowledge receipt of the below identified:

Items Faxed: Fax Cover Sheet; Transmitted (in dup.); Petition and Fee for Extension of Time (in dup.); and Amendment and Request for

Reconsideration.

BRINKS HOFER GILSON & LIONE By: Amanda M. Church, Reg. No. 52,469 Date of Faxing: October 2, 2003

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> > OCT 0 2 2003

		TR	ANSMITTAL LET	EK					0. 659/691	
Serial No			Date		Examin	er		Group A 3654	urt Unit	
09/659,307 Inventor(s)		Septe	September 12, 2000		Rivera			JU04		
Newman	•									
Title of In		Vinna Dian								
Monuaud	System for a Wet V	TIPES DISP	टाउच		-		···			
			TO THE COM							
_	Transmitted herewith is Petition and Fee for Extension of Time (in dup.); Amendment and Request for Reconsideration.									
	Small entity status of this application under 37 CFR § 1.27 has been established by verified statement previously submitted.									
	Applicant claims small entity status. See 37 CFR1.27.									
$\boxtimes$	Petition for a 1_month extension of time,									
	No additional fee is required.									
	The fee has been calculated as shown below:									
	Other Than Small Entity Small Entity									
	Oleima		Highart N-		]			·or		
	Claims Remaining		Highest No. Previously	Prese	nt		Add1	"	_	Add'l
	After Amendment		Paid For	Extra		Rate	Fee		Rate	Fee
Total	, n	Minus		ļ		x \$9=			x \$18≃	
Indep.	<u> </u>	Minus .				× 43=			x \$86=	
First Pres	sentation of Multiple	Dep. Clair	m <u> </u>			+\$145=			+ \$290=	
						Total add'i fee	\$		Total add'i fee	\$
$\boxtimes$	Please charge Deposit Account No. 23-1925 (BRINKS HOFER GILSON & LIONE) in the amount of \$110,00. A duplicate copy of this sheet is enclosed.									
	A check in the amount of \$ to cover the filing fee is enclosed.									
$\boxtimes$	The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this communication or credit any overpayment to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.									
$\boxtimes$	I hereby patition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed.  Please charge any associated fees which have not otherwise been paid to Deposit Account No. 23-1925. A duplicate									
	copy of this sheet i			- 1101 011	i ėl kipa (		podis riot		//	
	Respectfulty submitted,									
				Regi		hurch Io. 52,469	1.C	Rus	ch_	_
	HOFER GILSON &	LIONE		Attor	ney for A	pplicant				
P.O. BO CHICAG (312) 32	O, ILLINOIS 60610									,
	certify that this corr 7, on <u>October 2, 200</u>		ce is faxed to the	U.S. Pa	tent and	Trademark Offic	e, Exami	lner <u>Rive</u>	<u>ra</u> at Fax Num	nber <u>703-</u>
Date; <u>O</u>	<u>ctober 2, 2003</u> Si	ignature;	Mana	la	Chi	uch	<del>-</del>			
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